

## IP DECITABINE (28 DAYS)

Types: ONCOLOGY TREATMENT

Synonyms: MDS, DECITABINE, DACOGEN, DEE, LEUKEMIA

Cycle 1	Repeat 1 time	Cycle length: 28 days
<b>Day 1</b> Perform every 1 day x1		
<b>Provider Communication</b>		
<b>ONC PROVIDER COMMUNICATION 5</b> Interval: Once Occurrences: -- Comments: Use baseline weight to calculate dose. Adjust dose for weight gains/losses of greater than or equal to 10%.		
<b>Labs</b>		
<input checked="" type="checkbox"/> <b>BASIC METABOLIC PANEL</b> Interval: Once Occurrences: --		
<input type="checkbox"/> <b>COMPREHENSIVE METABOLIC PANEL</b> Interval: Once Occurrences: --		
<input checked="" type="checkbox"/> <b>CBC WITH PLATELET AND DIFFERENTIAL</b> Interval: Once Occurrences: --		
<input checked="" type="checkbox"/> <b>MAGNESIUM LEVEL</b> Interval: Once Occurrences: --		
<input type="checkbox"/> <b>LDH</b> Interval: Once Occurrences: --		
<input type="checkbox"/> <b>URIC ACID LEVEL</b> Interval: Once Occurrences: --		
<input type="checkbox"/> <b>ECHOCARDIOGRAM COMPLETE W CONTRAST AND 3D IF NEEDED</b> Interval: 1 time imaging Occurrences: --		
<b>Line Flush</b>		
<b>sodium chloride 0.9 % flush 20 mL</b> Dose: 20 mL Route: intravenous PRN Start: S		
<b>Nursing Orders</b>		
<b>sodium chloride 0.9 % infusion 250 mL</b> Dose: 250 mL Route: intravenous once @ 30 mL/hr for 1 dose Start: S Instructions: To keep vein open.		
<b>Pre-Medications</b>		
<input checked="" type="radio"/> <b>ondansetron (ZOFRAN) injection 8 mg</b> Dose: 8 mg Route: intravenous once for 1 dose Start: S		
<input type="radio"/> <b>ondansetron (ZOFRAN) tablet 16 mg</b> Dose: 16 mg Route: oral once for 1 dose Start: S		

○ **ondansetron (ZOFTRAN) 16 mg in dextrose 5%  
50 mL IVPB**

Dose: 16 mg

Route: intravenous

once over 15 Minutes for 1 dose

Start: S

End: S

**Ingredients:**

<b>Name</b>	<b>Type</b>	<b>Dose</b>	<b>Selected</b>	<b>Adds Vol.</b>
ONDANSETRON HCL 2 MG/ML INTRAVENOUS SOLUTION	Medications	16 mg	Yes	No
DEXAMETHASONE 4 MG/ML INJECTION SOLUTION	Medications		No	No
SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	Base	50 mL	No	Yes
DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	Base	50 mL	Yes	Yes

Chemotherapy

**decitabine (DACOGEN) 20 mg/m2 in sodium  
chloride 0.9 % 100 mL chemo IVPB**

Dose: 20 mg/m2

Route: intravenous

once over 1 Hours for 1 dose

Offset: 30 Minutes

**Ingredients:**

<b>Name</b>	<b>Type</b>	<b>Dose</b>	<b>Selected</b>	<b>Adds Vol.</b>
DECITABINE 50 MG INTRAVENOUS SOLUTION	Medications	20 mg/m2	Main Ingredient	Yes
SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	QS Base	100 mL	Yes	Yes
DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	QS Base		No	Yes

Hematology & Oncology Hypersensitivity Reaction Standing Order

**ONC NURSING COMMUNICATION 82**

Interval: Until discontinued  
Comments:

Occurrences: --

- Grade 1 - MILD Symptoms (cutaneous and subcutaneous symptoms only – itching, flushing, periorbital edema, rash, or runny nose)
1. Stop the infusion.
  2. Place the patient on continuous monitoring.
  3. Obtain vital signs.
  4. Administer Normal Saline at 50 mL per hour using a new bag and new intravenous tubing.
  5. If greater than or equal to 30 minutes since the last dose of Diphenhydramine, administer Diphenhydramine 25 mg intravenous once.
  6. If less than 30 minutes since the last dose of Diphenhydramine, administer Fexofenadine 180 mg orally and Famotidine 20 mg intravenous once.
  7. Notify the treating physician.
  8. If no improvement after 15 minutes, advance level of care to Grade 2 (Moderate) or Grade 3 (Severe).
  9. Assess vital signs every 15 minutes until resolution of symptoms or otherwise ordered by covering physician.

**ONC NURSING COMMUNICATION 83**

Interval: Until discontinued  
Comments:

Occurrences: --

- Grade 2 – MODERATE Symptoms (cardiovascular, respiratory, or gastrointestinal symptoms – shortness of breath, wheezing, nausea, vomiting, dizziness, diaphoresis, throat or chest tightness, abdominal or back pain)
1. Stop the infusion.
  2. Notify the CERT team and treating physician immediately.
  3. Place the patient on continuous monitoring.
  4. Obtain vital signs.
  5. Administer Oxygen at 2 L per minute via nasal cannula. Titrate to maintain O<sub>2</sub> saturation of greater than or equal to 92%.
  6. Administer Normal Saline at 150 mL per hour using a new bag and new intravenous tubing.
  7. Administer Hydrocortisone 100 mg intravenous (if patient has allergy to Hydrocortisone, please administer Dexamethasone 4 mg intravenous), Fexofenadine 180 mg orally and Famotidine 20 mg intravenous once.
  8. If no improvement after 15 minutes, advance level of care to Grade 3 (Severe).
  9. Assess vital signs every 15 minutes until resolution of symptoms or otherwise ordered by covering physician.

**ONC NURSING COMMUNICATION 4**

Interval: Until discontinued  
Comments:

Occurrences: --

- Grade 3 – SEVERE Symptoms (hypoxia, hypotension, or neurologic compromise – cyanosis or O<sub>2</sub> saturation less than 92%, hypotension with systolic blood pressure less than 90 mmHg, confusion, collapse, loss of consciousness, or incontinence)
1. Stop the infusion.
  2. Notify the CERT team and treating physician immediately.
  3. Place the patient on continuous monitoring.
  4. Obtain vital signs.
  5. If heart rate is less than 50 or greater than 120, or blood pressure is less than 90/50 mmHg, place patient in reclined or flattened position.
  6. Administer Oxygen at 2 L per minute via nasal cannula. Titrate to maintain O<sub>2</sub> saturation of greater than or equal to 92%.

7. Administer Normal Saline at 1000 mL intravenous bolus using a new bag and new intravenous tubing.
8. Administer Hydrocortisone 100 mg intravenous (if patient has allergy to Hydrocortisone, please administer Dexamethasone 4 mg intravenous) and Famotidine 20 mg intravenous once.
9. Administer Epinephrine (1:1000) 0.3 mg subcutaneous.
10. Assess vital signs every 15 minutes until resolution of symptoms or otherwise ordered by covering physician.

**diphenhydramine (BENADRYL) injection 25 mg**

Dose: 25 mg                      Route: intravenous                      PRN  
Start: S

**fexofenadine (ALLEGRA) tablet 180 mg**

Dose: 180 mg                      Route: oral                      PRN  
Start: S

**famotidine (PEPCID) 20 mg/2 mL injection 20 mg**

Dose: 20 mg                      Route: intravenous                      PRN  
Start: S

**hydrocortisone sodium succinate (Solu-CORTEF) injection 100 mg**

Dose: 100 mg                      Route: intravenous                      PRN

**dexamethasone (DECADRON) injection 4 mg**

Dose: 4 mg                      Route: intravenous                      PRN  
Start: S

**epINEPHrine (ADRENALIN) 1 mg/10 mL ADULT injection syringe 0.3 mg**

Dose: 0.3 mg                      Route: subcutaneous                      PRN  
Start: S

Discharge Nursing Orders

**sodium chloride 0.9 % flush 20 mL**

Dose: 20 mL                      Route: intravenous                      PRN

**HEParin, porcine (PF) injection 500 Units**

Dose: 500 Units                      Route: intra-catheter                      once PRN  
Start: S

Instructions:

Concentration: 100 units/mL. Heparin flush for Implanted Vascular Access Device maintenance.

**Days 2,3,4,5**

Perform every 1 day x4

Nursing Orders

**sodium chloride 0.9 % infusion 250 mL**

Dose: 250 mL                      Route: intravenous                      once @ 30 mL/hr for 1 dose  
Start: S

Instructions:

To keep vein open.

Pre-Medications

**ondansetron (ZOFTRAN) injection 8 mg**

Dose: 8 mg                      Route: intravenous                      once for 1 dose  
Start: S

**ondansetron (ZOFTRAN) tablet 16 mg**

Dose: 16 mg      Route: oral      once for 1 dose  
Start: S

○ **ondansetron (ZOFTRAN) 16 mg in dextrose 5%  
50 mL IVPB**

Dose: 16 mg      Route: intravenous      once over 15 Minutes for 1 dose  
Start: S      End: S

<b>Ingredients:</b>	<b>Name</b>	<b>Type</b>	<b>Dose</b>	<b>Selected</b>	<b>Adds Vol.</b>
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	DEXAMETHASONE 4 MG/ML INJECTION SOLUTION	Medications		No	No
	SODIUM CHLORIDE 0.9 % INTRAVENOUS SOLUTION	Base	50 mL	No	Yes
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Chemotherapy

**decitabine (DACOGEN) 20 mg/m2 in sodium  
chloride 0.9 % 100 mL chemo IVPB**

Dose: 20 mg/m2      Route: intravenous      once over 1 Hours for 1 dose  
Offset: 30 Minutes

<b>Ingredients:</b>	<b>Name</b>	<b>Type</b>	<b>Dose</b>	<b>Selected</b>	<b>Adds Vol.</b>
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	DEXTROSE 5 % IN WATER (D5W) INTRAVENOUS SOLUTION	QS Base		No	Yes